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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Inventor: **H. Vincent Poor
Andrew Logothetis**

Application No.: **09/667,651** ✓

Examiner: **Jason M. Perilla**

Filed: **September 22, 2000**

Group Art Unit: **2643**

Docket No.: **P-24,338-A USA**

Title: **METHOD AND APPARATUS FOR SCHEDULING SWITCHED
MULTIBEAM ANTENNAS IN A MULTIPLE ACCESS ENVIRONMENT**

CERTIFICATE OF FACSIMILE/MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service on February 4, 2005, in an envelope as First Class Mail, postage prepaid, addressed to: Mail Stop Issue Fee, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

4 February 2005
Date

Diane A. Sears
Diane A. Sears

Mail Stop Issue Fee
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

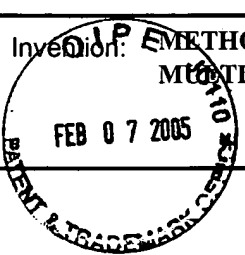


Sir:

AMENDMENT AFTER ALLOWANCE PURSUANT TO 37 C.F.R. §1.312

In response to the Notice of Allowance and Examiner's Amendment dated January 13, 2005, please amend the above-identified application as follows:

A copy of the claims as amended begins on page 2 of this paper.

Remarks/Arguments begin on page 9 of this paper.

AMENDMENT TRANSMITTAL LETTER (Large Entity)			Docket No. 24,338-A USA		
Applicant(s): H. Vincent Poor and Andrew Logothetis					
Serial No. 09/667,651	Filing Date 9/22/2000	Examiner Jason M. Perilla	Group Art Unit 2634		
Invention: METHOD AND APPARATUS FOR SCHEDULING SWITCHED MULTIBEAM ANTENNAS IN A MULTIPLE ACCESS ENVIRONMENT 					
<u>TO THE COMMISSIONER FOR PATENTS:</u>					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	22 -	26 =	0 x	\$50.00	\$0.00
INDEP. CLAIMS	2 -	3 =	0 x	\$200.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.					
 Signature Theodore Naccarella, Esquire Registration No. 33,023 Synnestvedt & Lechner LLP 2600 Aramark Tower 1101 Market Street Philadelphia, PA 19107 Telephone: (215) 923-4466 Facsimile: (215) 923-2189			Dated: 2.3.05		
CC:			<div style="border: 1px solid black; padding: 5px;"> <p>I certify that this document and fee is being deposited on 2/4/2005 with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.</p> <p style="text-align: center;"> Signature of Person Mailing Correspondence</p> <p style="text-align: center;">Diane A. Sears Typed or Printed Name of Person Mailing Correspondence</p> </div>		